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MANAGEMENT TRAINING IN HEALTH SECTOR IN INDIA: NEEDS AND CHALLENGES

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Abstract

The first part of the paper makes an attempt to assess the management training needs in the health care sector, within the macro and micro perspective. It emerges that latent need exists which is yet to be converted into emphatic demand. On one hand, some of the health care executives have not been able to define their needs, some others have gone ahead to the extent of expressing their general and specialized managerial needs. The type of skill needs are further classified based on the source of origin, in the second part of the paper. The third part highlights how the training needs are being catered, and deals with the supply perspective. It mentions about the prevailing traditional models of training-supplemented by those based on the emerging needs. It describes how Indian Institute of Health Management Research (IIHMR), Jaipur is addressing this need through its various programmes. In the end, the authors who are closely

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associated with these training programmes mention about the associated issues and challenges in the process. They conclude by advocating that hospitals and health care sector and training institutions need to develop stronger relationship and it reaffirms that with the changing times, better and professional management is imperative for the survival of health care organizations.

Introduction

'Some Unique Aspects of Healthcare Management' (Trent, 1986)- states that inspite of hospitals increasingly being viewed as an industry, management is different in hospitals. Many reasons exist for this phenomenon.

* The profession is relatively young; it is growing and establishing itself
* Healthcare management is not yet widely recognised as a profession by the developed and developing countries.
* Physician domination in this field has not provided adequate place to the healthcare executives
* Hospital administration is yet to acquire the authority and control inherent in comparable executive positions in business.

A committee of the American Hospital Association in 1913 noted the desirability of university training for hospital administrators, and in 1992, a Rock feller Foundation study recommended that "university courses be"... offered for the training of hospital administrators". Hospital administration thus gradually evolved into a profession-one comprised of management science. The profession/discipline is still in its evolutionary stage in India. But the continuing need for management of health services is undisputed, despite this fact health planners, policy makers, providers of the health care services and the producers of health manpower have not given significant attention.

Associated with this, comes the issue that when the hospital and health management profession is in its nascent stage, how effectively are the institutions prepared to meet the fast changing

health management needs of these organizations. Their training methodologies and tools need to be improved further. The challenge is how the academic and practising managers work in achieving these objectives.

Need for Management training in health sector

Rapid technological and structural changes are taking place in the health sector. The organization and management of the health sector is fast responding to these internal and external changes. Among these changes, of foremost importance is the dramatic shift in the health seeking behaviour of the people, coupled with the increasing competition among health care organizations, more so in the private sector, incoming of the state-of-the-art technologies, inclusion of medical services under the Consumer Protection Act (CPA), growth of medical specialities and super-specialities, issues of cost and quality, and the proliferation of market into various segments with varying needs. The challenge, therefore is to strike a balance between the available resources and the needs of all the stakeholders. Hence, the need for management training can hardly be exaggerated.

Frequent changes in the external environment have exerted influences in every area providing ample scope for changes at policy, structure and system level. When India is still struggling to deal with the first generation diseases, third generation diseases have crept in a big way. To cope with this changing scenario, a huge infrastructure with a number of hospitals in both the public and private sectors, (mostly 'corporate' and for profit in nature) have come up. Encouraged by these changes, the health insurance companies have started entering the healthcare market, adding to the growing complexity of management. Industries in allied areas like the diagnostics centres, financing companies, pharmaceuticals, insurance, research and consultancy organisations, and a host of many other areas have started mushrooming and trying to establish themselves.

Effective management is increasingly considered imperative in hospitals, than other health care institutions. Hospitals account for a large part of the public expenditure on health. It is likely to

further increase with the changing epidemiological scenario, highly sophisticated medical technologies, rapid advances in therapeutics, increasing population, and the increasing expectations of more and more services with emphasis on quality. On the other hand pressure by payers to contain costs and the increasing competition to deliver better health care services has been posing a challenge to the hospital industry. To meet this changing pattern witnessed among the policy makers, providers and consumers, need for better management is being perceived more than ever before. This explains the need for professionals trained in hospital and health management.

There is a growing realisation among experts and practitioners that while need for hospital management professionals is acute, newer areas are emerging where such managers can be most effective. Today, departmental heads and decision makers, both from medical and para-medical staff, feel that there is need for greater co-ordination and team work within the organization, promotion and enhancement of organizational culture and values, promotion and marketing of services, cost containment knowledge, human resources management and a host of various health service and support functions, in which they should be trained.

In a mail survey undertaken by Pahariya (IIHMR, 1997) in 30 hospitals (private-for-profit, trust and autonomous) in the country, to estimate the changing trend in requirement of hospital management professionals, it emerged that

* Currently professionals trained in hospital management are extremely few. In most cases, the position of Chief Administrator was held by those with an experience (administrative or clinical) of 8-10 years, but with no formal training in management.

* Few hospitals have personnel trained either or, both, in general management area and hospital management. Most of them possess diploma of six months to one-year duration and are working as executives (entry-level positions) in various functional departments namely Stores and Materials Management, Housekeeping, Laundry, Human Resource

Management, Marketing, Public Relations, General Management, and some in Quality Assurance departments. Persons with M.D. in Hospital Administration or Master of Hospital Administration (MHA) degree (with MBBS and depending on the length of experience) are occupying mid-level or senior level administrative positions. Depending on the size of hospitals Persons with a fresh MHA have been recruited by big (corporate) hospitals and offered entry-level positions, similar to their counterparts (MBAs) in the business sector. It is also observed that many hospitals have entrusted the responsibility of administration to physicians, after having contributed several years of their career to clinical services. These physician turned administrators may or may not be exposed to training in management. It is assumed that the experience they hold (whether clinical or administrative) will enable them to handle the hospital administrative tasks better.

* Hospitals having an experience of working with general management or hospital management graduates have indicated their willingness to recruit persons trained in hospital management, while those who had no management trained person with them could not categorically state anything.

* Respondents were asked to quantify the need for personnel trained in hospital management in their hospitals by 2000 A.D. Of the 30 hospitals surveyed, total number estimated is 160.

* To understand the eye of knowledge and skills that hospitals look for while recruiting a person for management of hospital services, the respondents were asked to indicate their preference against the listed categories. Categories listed were MBBS+MD/MHA, MHA, MBA, MBBS+some experience, graduate+experience in hospital management area, and any other. Findings show that 40 per cent of the respondents gave preference to MBBS+MHA or MD (Hosp Admn), while an equal number of hospitals preferred MHA in the first place Next preference (after considering MBBS+MHA, and

MHA) was given to MBAs (12 per cent of respondents), and the remaining preferred fresh graduates (bachelors) with experience in health/hospital administration

i) Respondents who preferred MBBS+MHA/MD in the first place reasoned that a medical graduate is well received and accepted by the medical fraternity and he is able to understand the problems of clinicians better because of his familiarity to the discipline 2 of the 15 respondents in this category also opined that a person with MBBS degree is able to empathize with the patients. Almost 50% of the 15 respondents said that a person who has training in both medicine and management is the best fit.

ii) Another group which preferred MHA in the first place reasoned that MHA is trained in management for a healthcare set up. He/She is familiar to the hospital environment and medical terminologies and at the same time is well versed in management theory with adequate skills. He is considered the right person for administration and can be easily groomed. Some respondents opined that persons with MBBS+MHA are not able to come out of the medical mode and lack effectiveness in management. Almost 35% of the respondents in this group opined that it was waste of knowledge since they felt that a medicine graduate is performing dual functions, i.e. rendering clinical services and overseeing administration of the hospital, thereby unable to do justice to both.

iii) Still others who preferred MBA in the second place and one respondent gave it the first place said that business graduates have an overall perspective of management, are better aware of the recent changes in the environment and the management discipline. While those who gave second preference stated that the MBA is trained for management in industries and hospital is coming up as an industry. They are better able to draw similes and borrow best practices from the business sector.

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It is also important to mention at this instance that all trust run or charitable hospitals covered by the survey, conveyed their inability to hire hospital management graduates because of financial problems, but indicated their willingness to do so, if opportunity arises.

Another study by IIHMR (Kanjilal and Pathak, 1996) revealed that the need for management inputs in a hospital or health care organization depends on various factors, such as 1) the operational scale, 2) the ownership pattern and top level management structure, 3) location (urban or rural); 4) economic motive (charity, profit, or welfare maximization), 5) the operational diversities, and 6) clientele pattern.

Therefore, it can be stated that the demand for hospital administrators is a derived demand, depending on the primary demand for hospital services. At the same time, it is also evident that there is a need for better management among the healthcare institutions but the employers have not been able to clearly identify their needs and state it explicitly.

Classification of need

With the prevailing pattern, it emerges from the mail survey that hospitals and other healthcare institutions have offered administrative positions to clinicians within the hospital hierarchy or are prepared to recruit fresh hospital management graduates in various departments/functions to provide support in specialized areas, thus contributing towards the overall management of the institution/organization.

In the developing world, fresh medicine graduates are made incharge of rural health care centres. Being medical officers in-charge of the centers, they are expected to provide comprehensive primary health care services and thus organize all services required to satisfactorily offer services to the community. These medical officers require management skills to effectively organize their services and manage the staff functions, besides clinical knowledge.

The modern health care organization is a complex entity with numerous stakeholders having divergent interest. Managing these

complex organizations requires individuals with a variety of skills. Many people, forces, and factors influence the role and functioning of the healthcare manager physicians, trustees, medical care professions, scientists and professional societies, professional schools, news media, society, and the patient. So, in the forthcoming days health care organizations will need people having knowledge and skills in different fields of management to deal with a variety of problems, newly emerging areas and needs of various interest groups.

A clear statement about the total requirement and the type of persons needed within the healthcare organizations cannot be made, as the demand is yet to crystallize in the healthcare organizations. The survey undertaken by Kanjilal and Pathak (1996) to asses the managerial needs of the health care industry reveals that there is significant variation in these needs, across the type of organizations. The small and the medium sized hospitals require administrators with strong general management skills, while the larger ones need persons trained in specialised areas like finance, HRD, materials, marketing etc., to assist the chief administrator in the overall management of the hospital.

The missionary and charity hospitals deal more with community healthcare, thus they expect a trained person with sufficient exposure to public health management courses. The corporate hospitals wanted to see them as leaders in hospital planning and growth. Big missionary hospitals want special training on off-the-stream subjects, such as Medical Ethics, Passion and Motivation in Indoor Care, Rational Drug Therapy, etc. The NGOS would expect the person to be specially trained in community health care, organizational development, and social development. These medium and big sized hospitals have different requirement for different roles and positions. The same finding is also reflected in the recent mail survey (Pahariya, IIHMR 1997).

There is an increasing demand for learning job skills in the areas of health services management, financial management, HRM, information systems, marketing and strategic planning. Therefore, hospital administrators today need to be educated in highly

sophisticated curricula in the multiple areas of management, economics, finance, accounting, decision science, marketing, planning, policy and the culture of health systems.

It is worthwhile to mention at this juncture that a specialist manager is one with rigorous training in one of the functional areas of business, while a generalist has given more equal coverage to each functional area including in this instance health care administration. Both generalist and specialist, however, may be appropriate candidates for specific positions in hospitals or alternative delivery systems.

Education for health administration is concerned with preparation for a tremendous diversity of potential assignments ranging from the management of very large and complex organizations, offering one of the most challenging and difficult management assignments in our society, to quite small agencies with narrowly defined and limited objectives.

There are two primary sources of demand for graduate education in health and hospital administration. The first consists of young, inexperienced individuals seeking to prepare themselves for entry-level positions in the health care organizations. The second is composed of more mature individuals already working in the health sector and who need management education to fulfill the expanded or higher level responsibilities in their present jobs.

In medical education, management does not occupy any place. A fresh graduate doctor does not possess any basic orientation to management. But contrary to this, it is being increasingly felt that clinicians need to be provided basic orientation to management. For effective team work is important for any healthcare organization and to deal effectively with their team members doctors need to develop skills in this area. Not only this, but optimum utilisation of resources is the responsibility of all members of the organization and if physicians in the hospital make conscious decisions, it will improve the hospital performance.

It needs to be mentioned that an ideal management educational programme should anticipate the current and future needs of the

various market segments and accordingly design and deliver the programme.

How are the training needs catered?

A number of training institutions are producing fresh graduates and upgrading the skills of the existing health personnel by providing training to meet their needs. Among these, is the traditional health management education model closely linked to the Preventive and Social Medicine aspects offered by medical colleges. Supplementing them, are the newer models catering to the development of both the fresh graduates for entry-level positions and building the capacity of the existing executives.

Looking to the profile of various programmes offered by institutions and universities, it is evident that several long-term and short-term, full-time, part-time and distance learning programmes have been added in the last five years. The paper highlights about the programmes which have come up recently.

Among the medical colleges and hospitals, All India Institute of Medical Sciences (AIIMS), Delhi was perhaps the first to offer an M.D. in Hospital Administration in 1966. Following this other organisations like Armed Forces Medical College, Pune, Nizam Institute of Medical Sciences, Hyderabad, Kasturba Gandhi Medical College, NIHFW and recently Madurai Kamaraj University, Madurai, Tata Institute of Social Sciences, Mumbai, Devi Ahilya University, Indore, BITS, Pilani, IIHMR, Jaipur are offering one-year, or two-year degree/diploma programmes.

The different models of education cater to varying client segments in health and hospital management. The MD programmes entertains medicine graduates and have a long term residency in hospitals. AIIMS, Kasturba Gandhi Medical College, are institutions offering full-time MD programmes, Master of Hospital Administration (MHA) programmes focus on core management courses in the first year, followed by specialized courses in hospital/ health management with practical orientation by inculcating field visits, project work of a total of about 6-8 months in the course curriculum. A distinguishing feature of this programme is that

admission is open to both medicine and non-medicine graduates. Institutions offering MHA or equivalent programmes are Apollo, Madurai Kamaraj University, TISS, IIHMR, and several others. One-year, full-time diploma programmes with special focus in health/hospital management are offered by NIHFW, IIHMR, CMC, St. John's Hospital and others.

Diploma programmes with one-year or six-months duration usually provide orientation to management theories. Besides, part-time and distance learning programmes are also offered. One such institution in BITS, Pilani which is offering M.Phil in health and hospital systems for medicine graduates and non-medicine graduates working with hospital/healthcare organization. Recently institutions have come up which are offering under graduate education in hospital management. Devi Ahilya University is an example, offering a five-year Master's programme in Hospital and Health care Management for high school students.

Some educational institutions have traversed further to cater to the needs of mid-career professionals for general and specialized management skills. Short-term executive development programmes are being offered by various institutions within the country. Besides, distance learning programmes are also meeting the needs of those mid-career professionals who are unable to attend full-time courses.

IIHMR's Experience

The Indian Institute of Health Management Research (IIHMR), at Jaipur has made pioneering efforts to further and strengthen the health education movement in the country. With its exclusive focus on health management, it is addressing the needs of the healthcare industry by producing fresh graduates trained in hospital/health management and also upgrading the skills of existing professionals.

IIHMR has embarked upon providing short-term and long-term quality educational programmes oriented to management for producing a critical mass of trained professionals, who can take up leadership roles and another stream for entry-level positions in the health and hospital industry. It offered for six years, a one-

year Diploma programme in Health Management for mid-career professionals usually from the public sector. It is currently offering, in collaboration with the University of North Carolina, USA, an Executive Program on Health and Population for mid-career professionals from the developing countries, chiefly targeted to South Asia. Under this programme it offers two master's degree programmes: public health (MPH) and health-care administration (MHA). Besides, it offers a two-year, full-time Post-graduate Diploma in Hospital and Health Management (PGDHM) for graduates from all disciplines. The programmes has two tracks: Health Management, and Hospital Management. Being a two-year programme, core courses on management are taught in the first year, and specialized courses on hospital and health management are offered in the second year. Practical training occupies a significant place and a eight-week summer project and 4-5 months thesis work in a healthcare set up is part of the curricula. IIHMR also caters to the specific needs of the mid-career professionals by offering special training programmes of a week to ten days duration on several management aspects.

This huge infrastructure of educational institutions which is still growing, provides enough evidence to the fact that need for hospital/health management professional exists.

Relevant Issues and Challenges

In this part, the authors tries to delineate certain issues emerging from their experience in health management education and based on the studies undertaken at the institute.

Emphasizing the point made in the introduction of this paper, it is restated that as a profession, health administration is a speciality in transition and evolution. The role and responsibilities of a hospital administrator, detailed job descriptions of hospital management executives, and the required knowledge and skills still needs to be defined. The transitory state of health administration profession, the rapidly evolving and diverse situations and relationships among which it is expected to practice, and its ill defined nature and varying competency levels indicate a need for generalized types of credentials for entry-level purposes

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Institutions may be producing a wealth of health administrators to meet manpower requirements, but it may not be of the type perceived as needed by either the marketplace or the more established components of the profession. This calls for standardization of educational programmes, on the one hand, and the profession's continued need to develop and evolve on the other.

The primary mechanism for quality assurance is standardization and accreditation process. Training institutions have started experiencing the problem of recognition and sustainability. The University System has not adopted these programmes, and the Medical Council of India (MCI) accreditates programmes offered by the medical institutions admitting medical graduates or healthcare executives. The need is to recognize such programmes equivalent to master's programme and help in establishing hospital and health management as a discipline. An urgent need is to provide specialized accreditation of schools and departments within colleges and universities awarding these degrees, professional association membership, and state licensure mechanism. Accreditation by a approved body will give thrust to the growth and development of this discipline and profession.

The image and role of the health manager needs to be enhanced by developing and promoting a concept of what the profession can be and what part the managers might play in the health field. This should be the responsibility of government, professional associations, professional schools and private health care players.

When the educational institutions offering hospital management education are still struggling to establish themselves, the absorption of these graduates within the marketplace is also not quite bright. The health care sector is experiencing a latent need and, is not well-prepared to nurture, accommodate and utilize these young hospital and health management graduates. The biggest challenge to these institutions is to first help the industry realize the need or wait till it surfaces by itself. Here lies the need for recognition that for better health care and health services management, modern management concepts and techniques need to be applied. This leads to the immediate need for recognition of health administration as a profession and building up career prospects in this field.

Another significant problem facing these programmes is how best to recruit, retain, and sustain a faculty with an appropriate mix of scholars and practitioners. There is also a shortage of training personnel and educational material due to lack of any considerable work in this field.

The issue of a medical administrator and non-medical administrator continue to be a point of contention among the health professionals. In a small survey conducted by IIHMR, it was evident that need for the type of administrators vary with the nature and size of the organization. But the debate still continues on who is an effective manager? There has been no large-scale examination of this perception, as can be seen is the limitation of the study conducted by IIHMR, but it is a theme that surfaces in many presentations and studies. The physician turned administrator is not well versed to deal with the various functional and behavioural aspects. Besides, with several newer super-specialities and specialities emerging in the medical sector, it cannot be expected that a physician administrator is abreast with the diverse needs of all types of physicians.

As referred earlier from Trent, physician domination as compared to the healthcare executives is high in healthcare. There is a need to educate and advocate that physicians need not be the adversaries of administrators, but rather colleagues. This suggests that administrators and physicians should be brought together for joint education activities, with a special focus on team building and team interaction.

The linkage between the educator, health administrator, and the clinician is of major importance because one key to a successful health system is a positive, productive partnership arrangement between the physicians and management. Administrators and physicians need to understand each other and the issue that affect them in real-life situations.

The curriculum and design need to focus on general management and functional management and offer courses tailor-made depending on the needs of the individual and the industry. Where some hospitals have realized the need for general

management, there are others who have traversed further and have opined the need for specialized management skills, besides general management. Now, managers are required to have skills to guide an organisation in a highly competitive market. Health administration education programmes must change to prepare individuals for the increased emphasis on competition. Functional management skills need to be strengthened in the curricula of health programs.

In 1984, University of Montreal organized 2 study sessions to which they invited representatives of important employers in the Quebec health care field and a group of former graduates and asked for the participants' views on 1) the problems they were confronting, 2) the knowledge areas they felt graduates should master 3) the skills that should be developed while at university. The problems identified ranked in decreasing order of importance, were:

- managing change and adapting to a changing environment
- lack of a province wide health care plan resulting in a lack of coherence and predictability in policy making
- a perceived scarcity of resources in relation to increasing demands and needs within the Quebec population
- lack of, and difficulty in establishing, reliable and valid performance criteria
- managing labour relations, human resources, and employees motivation
- excessive bureaucratization
- lack of creativity in problem-solving
- managing power relations within the organizations (Gosselin, 1986)

It can be inferred from the above reference that education of health administrator must be focused on the changing role, an enlarged function, and a broader set of responsibilities for the manager. The professional schools of health management which

turn out younger men and women will be required to provide refresher programmes in the future.

The education of administrators should be integrated to the greatest extent possible with other health professionals. Special workshops should be offered round the year for health practitioners in the region to acquaint them with new developments in management sciences, policy analysis, behavioural science applications and other fields.

It is important that more emphasis be placed on networking. Creating opportunity for networking through development of closer ties between universities and professional societies, jointly sponsored seminars between faculty and practicing executives, will provide a forum for the exchange of thoughts and opportunity for mutual development of students and practitioners.

Effective linkages need to be developed between health educators and business. Managers and leaders should be trained in the same skills and knowledge base as the managers and leaders of other major industries. Our health care managers and leaders face and increasingly will face the same management decisions as their counterparts in other industries.

On one hand when competitions have taken hold, effective performance, efficiency, and profit making are the key concepts, at the same time healthcare management is characterized by intense concern, dedication and professional commitment which are unique to the profession. The profession needs early acceptance, promotion and balanced development.

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